UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D.
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number:
Expires: April
April
1086
07048544

Name of Offering ( check if this is an amend	ment and name has	changed, and indicate	change.)		4		
Star Tribune Holdings Corporation	<u> </u>						
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505		Section 4(6)	□ ULOE		
Type of Filing: New Filing	Amendment						
	A. BA	SIC IDENTIFICATION	I DATA				
1. Enter the information requested about the is	ssuer				J A		
Name of Issuer ( check if this is an ame	ndment and name h	as changed, and indic	ate change.)				
Star Tribune Holdings Corporation					4		
Address of Executive Offices	(Number and Stre	et, City, State, Zip Co	de)	Telephone Number (Inclu	ding Area Code)		
Star Tribune Holdings Corporation				(212) 593-6958			
c/o Avista Capital Partners			•				
65 East 55 <sup>th</sup> Street					'		
New York, NY 10022							
Address of Principal Business Operations	(Number and Stre	et, City, State, Zip Co	de)	Telephone Number (Inclu	ding Area Code)		
(if different from Executive Offices)							
Dist Description of Design					BAAFCCE		
Brief Description of Business	haldina assassas ba	ulas interpota in a cube	nidian, which ic o	ngogod in news and informa	<b>ドバッグドレンジェア</b>		
Brief Description of Business Star Tribune Holdings Corporation is a parent I distribution.	noiding company na	Auth litteresis at a subs	Sidially, WillCiris e	ilgaged in news and illigin	munipulmoming and		
distribution.					!		
	•				MAR 2 7 2007 o		
Type of Business Organization							
⊠ corporation	☐ limited partner	ship, already formed		other (please specify):	THOMSON		
☐ business trust	☐ limited partner	ship, to be formed			FINANCIAL		
E Daomoso Cast	C) minos pararo.		. Vana	<del></del>	FINANCOS		
		Month	Year		·		
Actual or Estimated Date of Incorporation or O	rganization:	1 2	0 6 ]	Actual	☐ Estimated		
Jurisdiction of Incorporation or Organization:	•	J.S. Postal Service ab		te: DE	•		
			a anatha a l	. ~ . ~ .			
a .	CN for Canada; F	N for other foreign juri	Suiction)	L	•		

## **GENERAL INSTRUCTIONS**

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

3235-0076 April 30, 2008

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		ellection of information of		re not required to	
(05-05) respond	unless the form displa	ys a currently valid OM	B control number.		
		A. BASIC IDENTIFI	CATION DATA		
2. Enter the information reques	•	·		•	
·		organized within the past five	*	a along of coulty excludito	n of the incurr
		dispose, or direct the vote or duers and of corporate general			s of the issuer,
	and director of corporate issuaging partner of partnership		and managing partners or pe	iluleranip laadera, and	¥
			Executive Officer	Director	☐ General and/or
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	The executive Officer	C) Director	Managing Partner
Full Name (Last name first, if	individual)				
Avista Capital Partners, L.P.					
Business or Residence Addre	-	City, State, Zip Code)			
65 East 55 <sup>th</sup> Street, New York					
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)		,		·
Avista Capital Partners (Offsh					
Business or Residence Addre		City, State, Zip Code)			
65 East 55 <sup>th</sup> Street, New York	, NY 10022			·	
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner     ■	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Avista Capital Partners GP, LI	LC, as General Partner o	f both Avista Capital Partn	ers, L.P. and Avista Capit	tal Partners (Offshore),	L.P.
Business or Residence Addre	ss (Number and Street, C	City, State, Zip Code)			
Avista Capital Partners, 65 Ea	ist 55 <sup>th</sup> Street, New York,	NY 10022			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Evans, Gregory	.*		. 4		
Business or Residence Addre			-		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or
Orlock Dox(CS) triat Apply.		La benenda owner			Managing Partner
Full Name (Last name first, if	individual)				
Harte, Christopher					
Business or Residence Addre	ss (Number and Street, 0	City, State, Zip Code)			ı
637 Country Road 411, Spice	wood, TX 78669				+
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Finkelstein, James		•			
Business or Residence Addre	ss (Number and Street, 0	City, State, Zip Code)			
c/o Avista Capital Partners, 6	5 East 55 <sup>th</sup> Street, New Y	ork, NY 10022			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Kwon, OhSang	,				
Business or Residence Addre	ss (Number and Street, 0	City, State, Zip Code)			,
c/o Avista Capital Partners, 6		- · · · · · · · · · · · · · · · · · · ·			,
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				armging raidio
Dean, Thompson	mairideal)		•		•
Business or Residence Addre	ss (Number and Street 4	City, State, Zin Code)			
c/o Avista Capital Partners, 6	•	•			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	General and/or
			South and Section Sections		Managing Partner
Full Name (Last name first, if Riggs, Michael	maividual)				, 

Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В	. INFORMA	TION ABOU	T OFFERIN	G	<del></del>	<del></del>	<del>` '                                   </del>	
<u></u>					• •							Yes	No
1.	Has the iss	suer sold,	or does the	e issuer inte	nd to sell, to	non-accred	ited investor	s in this offe	ring?				⋈
						so in Append		-					
2.	What is the	e minimur	n investme	nt that will b	e accepted	from any ind	ividual?					<u>\$</u>	<del> </del>
•	Daga tha a				!1!							Yes	No
3.			•	•	-	t?							⊠
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full	Name (Last	t name fir:	st, if individ	lual)								·	
Busi	ness or Res	sidence A	ddress (Nu	ımber and S	treet, City,	State, Zip Co	de)				•		
Nam	e of Associ	ated Brok	er or Deak	ег						·	,		
						olicit Purcha						☐ All States	3
[A	L) [/	AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	(DC)	(FL)	[GA]	[HI]	[ID]
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	Name (Last			•	treet, City,	State, Zip Co	de)					· · · · · · · · · · · · · · · · · · ·	<del></del>
Nan	e of Associ	ated Brok	er or Deal	ег							···	•	
Stat	es in Which	Person L	isted Has	Solicited or I	ntends to S	olicit Purcha	sers					· ·	
(	Check *All S	States" or	check indi	vidual States	s)							☐ All States	3
[A	r] (v	AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
	•	iN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
_		NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	(NC)	[ND]	[OH]	[OK]	[OR]	[PA]
[]	RI] [S	SC]	(SD)	[MT]	[XT]	[TU]	[VT]	[AV]	[WA]	[WV]	[WI]	[WY]	(PR)
Full	Name (Last	t name fin	st, if individ	lual)									
Business or Residence Address (Number and Street, City, State, Zip Code)													
Nan	e of Associ	iated Brok	er or Deal	er	•					•			
						olicit Purchas		<del></del>				☐ All States	
		AK]	[AZ]	(AR)	[CA]	[CO]		נשבו	[DC]	[FL]	[GA]	(HI)	, [ID]
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		NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
		SC]	[SD]	[TN]	[XT]	[UT]	[\forall]	[VA]	[AW]	[WV]	[W]	[WY]	(PR)
•	•	-		- •	- •	•	•	•		- •		- •	- •

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box ☐ and indicate in the columns below the amounts of the securities		
	offered for exchange and already exchanged.	•	
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	\$	\$
	Equity	\$109,000,000	\$109,000,000
	⊠ Common □ Preferred	***************************************	<u> </u>
	·	•	¢
	Convertible Securities (including warrants)	_	\$
	Partnership Interests	\$	\$
	Other ) (Specify	\$	\$
	Total	\$109,000,000	\$109,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
	· · · · · · · · · · · · · · · · · · ·	•	•
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		•
	Hone of Zelo.	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	\$109,000,000
	Non-accredited Investors		\$0
	·		\$
	Total (for filings under Rule 504 only)		<u> </u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all		
V.	securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
		Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	The state of the s	\$
			<del> </del>
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	<del>-</del>	\$
	Legal Fees		\$50,000
		─;	\$*.
	Accounting Fees	<del>-</del>	
	Engineering Fees		\$ -
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$50,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE	E, NUMBER OF INVESTORS, EXPENSES A	AND I	JSE OF PROCEEDS		)
	<ul> <li>Enter the difference between the aggregate</li> <li>Question 1 and total expenses in response to the "adjusted gross proceeds to the issuer."</li> </ul>	Part C - Question 4.a. This difference is			\$10	8,950,000
5.	Indicate below the amount of the adjusted gross to be used for each of the purposes shown. If furnish an estimate and check the box to the left listed must equal the adjusted gross proceeds to — Question 4.b above.	the amount for any purpose is not known, of the estimate. The total of the payments				
				Payments to Officers, Directors & Affiliates		Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installation	of machinery and equipment		\$		\$
	Construction or leasing of plant buildings ar	nd facilities		\$		\$
	Acquisition of other businesses (including the offering that may be used in exchange for the pursuant to a merger)	ne value of securities involved in this he assets or securities of another issuer		\$	⊠	\$108,950,000
	Repayment of indebtedness			\$		\$
	• •			\$		\$
	Other (specify):			\$		\$
				\$		\$
	Column Totals			\$	$\boxtimes$	\$108,950,000
	Total Payments Listed (column totals added	\$108,950,000				
		D. FEDERAL SIGNATURE				
cor	e issuer has duly caused this notice to be signed by estitutes an undertaking by the issuer to furnish to the hished by the issuer to any non-accredited investor	he U.S. Securities and Exchange Commission	this n	otice is filed under Rule on written request of its	505, t staff, t	the following signature the information
Iss	uer (Print or Type)	Signature / /		Date		
Sta	r Tribune Holdings Corporation	White King		3-16-07	<u> </u>	•
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				is.
Mic	hael Riggs	President, Treasurer and Secretary				

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

END